1295413

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB Number: 3235–0076
Expires: April 30, 2008
Estimated average burden
hours per response . . . 16.00



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DATE	RECEI	/CD				
DAIL	RECEI	/ED				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Series C Preferred Stock and underlying Common Stock issuable upon conversion thereof.						
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE						
Type of Filing: New Filing Amendment						
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer						
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Mendocino Software, Inc.						
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)						
47001 Benicia St., Fremont, CA 94538 PROCESSED (510) 226-4700						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)						
(if different from Executive Offices) Same as above. RECENTED Same as above.						
Same as above. Same as above. RECEIVED						
Brief Description of Business THOMSON						
Software Development FINANCIAL JUN 2 5 2007						
Type of Business Organization						
other (please specify):						
business trust limited partnership, to be formed						
Month Year						
Actual or Estimated Date of Incorporation or Organization: 0 3 0 3 Actual Estimated						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction) D E						

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDENT	IFICATION DATA						
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 								
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Colman, Steve								
Business or Residence Address (Number and S c/o Mendocino Software, Inc., 470								
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Urschel, Ted								
Business or Residence Address (Number and S c/o Mendocino Software, Inc., 470								
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Fong, Kevin				-				
Business or Residence Address (Number and S c/o Mayfield Fund, 2800 Sand Hill	• • • • •							
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Li, Ping								
Business or Residence Address (Number and S								
c/o Accel Partners, 428 University Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or				
	Beneficial Owner		☑ Director	Managing Partner				
Full Name (Last name first, if individual) Michl, Leigh								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Advent International, Inc., 75 State Street, 29th Floor, Boston, MA 02109								
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Holland, Paul								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Foundation Capital, 70 Willow Rd., Suite 200, Menlo Park, CA 94025								
Check Box(es) that Apply:	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Levine, Peter								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mendocino Software, Inc., 47001 Benicia St., Fremont, CA 94538								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		A. BASIC IDENTI	FICATION DATA						
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Sallaberry, Paul									
Business or Residence Addres c/o Mendocino Soft		reet, City, State, Zip Code) Benicia St., Fremont, CA							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if Accel Partners (and)							
Business or Residence Addres 428 University Ave	•								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if Foundation Capital	,	unds)							
Business or Residence Addres 70 Willow Rd., Suit									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if Mayfield Fund (and	•)							
Business or Residence Addres 2800 Sand Hill Rd.,									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if Advent Internation		iated funds)							
Business or Residence Address 75 State St., 29th Flo									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if EMC Corporation	individual)								
Business or Residence Address 176 South St., Hopl	•								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Vyant Technologies, Inc.									
Business or Residence Address 8292 Private Lane,	•	· · · · · · · · · · · · · · · · · · ·							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. □ Promoter Beneficial Owner Executive Officer ☐ Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Premo, Nur Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mendocino Software, Inc., 47001 Benicia St., Fremont, CA 94538 ☐ Promoter Beneficial Owner Executive Officer ☐ Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Kruger, Bob Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mendocino Software, Inc., 47001 Benicia St., Fremont, CA 94538 Check Box(es) that Apply: ☐ Promoter Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Heald, Mike Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mendocino Software, Inc., 47001 Benicia St., Fremont, CA 94538 Check Box(es) that Apply: Promoter Beneficial Owner □ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Burgener, Eric Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mendocino Software, Inc., 47001 Benicia St., Fremont, CA 94538 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Dholakia, Prashant Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mendocino Software, Inc., 47001 Benicia St., Fremont, CA 94538 Beneficial Owner ☐ Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INFOI	RMATION	ABOUT C	FFERING					
,			.1 .		. 11 .	1	•••	1 41 66				Yes	No
l. Ha	is the issuer	sola, or ac	es the issu						-		*********	Ш	\boxtimes
Answer also in Appendix, Column 2, if filing under ULOE.													
2. What is the minimum investment that will be accepted from any individual?													
3. De	oes the offer	ing permit	joint own	ership of a	single uni	t?						Yes ⊠	No □
co a ; sta	mmission or person to be	r similar re listed is a name of t	muneratio n associat he broker	n for solic ed person or dealer.	itation of portion of agent of the lift more to the lift	ourchasers i f a broker o han five (5	n connection r dealer reg persons to	n with sales istered with be listed a	of securitie the SEC ar	or indirect s in the offe nd/or with a d persons of	ring. If state or		····
Full Na	me (Last na N/A	me first, if	`individua	l)									
Busine	ss or Reside	nce Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Coo	ie)						
N1	<i>C</i> A		- Deelee										
Name (of Associated	u Broker o	r Dealer										
31-110	n Which Per												
(Che	ck "All Stat	es" or chec	k individu	al States)							•••••	∏ Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC)]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	.]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P R]
Full Na	me (Last na	me first, if	individua	l)									
	N/A												
Busines	ss or Reside	nce Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Cod	le)						
Name o	f Associate	d Broker o	r Dealer										
States i	n Which Per	rson Listed	Has Solic	ited or Int	ends to Sol	icit Purchas	sers						
(Che	ck "All State	es" or chec	k individu	al States)					***************************************				1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[1A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M1]	[MN]	[MS]	[MC)]
[MT]	[NE]	[NV]	[NH]	[N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	.]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR]
Full Na	me (Last na	me first, if	individua	l)									
Busines	N/A s or Resider	nce Addres	s (Numbe	r and Stree	et, City, Sta	ite, Zip Cod	le)						
					·,· , ·	, — . ,	,						
Name o	f Associated	d Broker o	Dealer										
States in	n Which Per	son Listed	Has Solic	ited or Int	ends to Sol	icit Purchas	ers						
(Check "All States" or check individual States)							☐ Al	States					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1D]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M1]	[MN]	[MS]	[MC)]
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	
[RI]	[SC]	[SD]	[TN]	[TX]	ודטן	[VT]	[VA]	[WA]	[VV]	[WI]	[WY]	[PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Amount Already Aggregate Offering Price Sold Debt -0--0-8,000,000.00 4,499,998.88 Equity □ Preferred Convertible Securities (including warrants) Partnership Interests..... -0--0-Other (Specify _____) -0--0-Total..... \$ 8,000,000.00 4,499,998.88 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 41 4,499,998.88 Non-accredited Investors -0--0-Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Security Sold Rule 505 N/A -0-Regulation A..... -0-N/A -0-Rule 504..... N/A N/A -0-Total..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees..... -0--0-Printing and Engraving Costs Legal Fees. \boxtimes \$To be determined Accounting Fees -0-Engineering Fees -0-Sales Commissions (specify finder's fees separately)..... -0-Other Expenses (identify ____) -0-Total \$To be determined

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
	S <u>8,000,000.00</u>						
5.	used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or propose to amount for any purpose is not known, fur estimate. The total of the payments listed musforth in response to Part C - Question 4.b. above	nish an steoual				
				Payments to Officers, Directors, & Affiliates	Payments To Others		
	Salaries and fees	•••••	□ s	-0-	□ \$ -0-		
	Purchase of real estate			-0-	-0-		
	Purchase, rental or leasing and installati	on of machinery and equipment	□ \$	-0-	□ \$ -0-		
	Construction or leasing of plant building	gs and facilities	□ \$	-0-			
	Acquisition of other business (including		-0-	-0-			
	offering that may be used in exchange for issuer pursuant to a merger)	s					
	Repayment of indebtedness	□ \$	-0-	° □ \$ -0-			
	Working capital		-0-				
	· ·						
			□ s		□ s		
			□ \$		S 8,000,000.00		
	Total Payments Listed (column totals ad	lded)			⊠ \$ 8,000,000.00		
		D. FEDERAL SIGNATURE		···	· · · · · · · · · · · · · · · · · · ·		
folio	owing signature constitutes an undertaking by	ned by the undersigned duly authorized pers the issuer to furnish to the U.S. Securities and any non-accredited investor pursuant to parag	Exchange	Commission 1	d under Rule 505, the upon written request of		
Issu	er (Print or Type)	Signatune 1	Dat	ie			
	idocino Software, Inc.			ne] , 2007			
Name of Signer (Print or Type) Title of Signer (Print or Type)					"		
Ted	Urschel						
		·			 -		



ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)